

Work Order ID 76112***76112***

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Monday, November 07, 2011 9:13:08 AM

Item ID: D2732-030 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Rubber Cushion
Start Date: 11/7/2011 Start Qty: 50.00 ***50*** Cust Item ID:
Required Date: 11/8/2011 Req'd Qty: 50.00 ***50*** Customer:
Reference: SCRAP

Approvals: Process Plan: mf Date: 11-11-07 Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr | Revision Nbr | | | | | | | | |
| D2732 | Rev B1 | | | | | | | | |

140

0.00

140

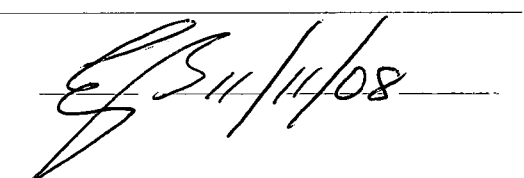
Packaging

Memo

0.00

Packaging

PULL FROM STOCK D2732-030 B 74626
MAT IN NO GOOD
SCRAP



150

QC21- Final Inspection - Work Order Release

0.00

150

QC

Memo

0.00

Quality Control

11/11/08
mf
11-11-08

Dart Aerospace Ltd

| W/O: | | WORK ORDER CHANGES | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector |
| | | | | | | | |
| | | | | | | | |

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

| NCR: | | WORK ORDER NON-CONFORMANCE (NCR) | | | | | | |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC Section A | Corrective Action Section B | | | Verification Section C | Approval Chief Eng | Approval QC Inspector |
| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
| | | | | | | | | |
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NOTE: Date & initial all entries

List Lots

Page 1 of 1

Monday, November 07, 2011 8:29:30 AM

| Criteria : All Items All Locations All Warehouses All Quantity | | | | | | | |
|--|-----------------------------|------------|-----------------|---------|---------------|-----------|----------|
| Item ID Item Name | Warehouse ID Location ID | Lot Number | Last Trans Date | Lot Qty | Shelf Life Dt | Type Code | Comments |
| D2732-030 Rubber Cushion | Main Warehouse ST402 | 74626 | 11/1/2011 | 50.0000 | | QC21 | |
| Total: | | | | 50.0000 | | | |

76112 h

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| W/O: | | WORK ORDER CHANGES | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector |
| | | | | | | | |
| | | | | | | | |

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

| NCR: | | WORK ORDER NON-CONFORMANCE (NCR) | | | | | | |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC Section A | Corrective Action Section B | | | Verification Section C | Approval Chief Eng | Approval QC Inspector |
| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
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NOTE: Date & initial all entries

Picklist Print

Tuesday, October 04, 2011 11:53:30 AM

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Work Order ID: 74626

Parent Item: D2732-030

Parent Item Name: Rubber Cushion



Start Date: 10/4/2011

Required Date: 10/5/2011

Start Qty: 50.00

Required Qty: 50.00

Comments: IPP Rev:A 10.11.02 as per revB DD verf:EC

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

D2732

Manufactured

No

100

f

548.8700

0.25

13.15789



Rubber Extrusion



Signature

Location

Loc Qty

Loc Code

ST410

548.87

70987

498.87

73759

50

13.15789

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| W/O: | | WORK ORDER CHANGES | | | | | |
|------|------|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE | By | Date | Qty | Approval Chief Eng / Prod Mgr | Approval QC Inspector |
| | | | | | | | |
| | | | | | | | |

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

| NCR: | | WORK ORDER NON-CONFORMANCE (NCR) | | | | | | |
|------|------|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP | Description of NC Section A | Corrective Action Section B | | | Verification Section C | Approval Chief Eng | Approval QC Inspector |
| | | | Initial Chief Eng | Action Description Chief Eng | Sign & Date | | | |
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NOTE: Date & initial all entries